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Date: July 29, 2004

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**PLEASE DELIVER THE FOLLOWING PAGES IMMEDIATELY TO:**

Name: Examiner Thong H. Vu

Phone: 703.305.4643

Your Ref:

From: David J. Bailey

Re: U.S. Patent Application Serial No. 09/483,315  
WIRELESS AUGMENTED REALITY COMMUNICATION SYSTEM

File: 39257/DJB/C766

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I HEREBY CERTIFY THAT THIS PAPER IS BING FACSIMILE TRANSMITTED TO  
THE UNITED STATES PATENT AND TRADEMARK OFFICE ON July 29, 2004.



Trudi Thompson

**\*Correspondence**

1. Petition for Extension of Time (2 pgs)
2. Amendment Transmittal (2 pgs)
3. Amendment (17 pgs)
4. Limited Recognition Document (1 pg)

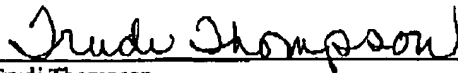
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**Return Fax to Trudi****Christie, Parker & Hale, LLP**  
3601 Jamboree Road  
Suite 6000  
Newport Beach, CA 92680  
Newport Beach: 949-476-0757  
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PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
AMENDMENT TRANSMITTAL LETTER**

*I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on July 29, 2004.*

  
Trudi Thompson

Applicant : Ann Devereaux, et al. Confirmation No. 8215  
Application No. : 09/483,315  
Filed : January 14, 2000  
Title : WIRELESS AUGMENTED REALITY COMMUNICATION SYSTEM  
  
Grp./Div. : 2142  
Examiner : Thong H. Vu  
  
Docket No. : 39257/RAG/C766  
Customer No. : 23363

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Post Office Box 7068  
Pasadena, CA 91109-7068  
July 29, 2004

Commissioner:

Enclosed is an amendment to the above-identified application.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	20	*75	0	0 x \$9.00	0 x \$18.00	0
Independent Claims	2	** 4	0	0 x \$43.00	0 x \$86.00	0
Multiple Dependent Claims ***				\$145.00	\$290.00	0
TOTAL FILING FEE						0
NO ADDITIONAL FEE REQUIRED ****	IF NO FEE REQUIRED, INSERT "0"					0
LIST INDEPENDENT CLAIMS: 76, 85						
• IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3 ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3 *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME **** IF NO FEE REQUIRED, ADDRESS ENVELOPE TO "BOX NON-FEE AMENDMENTS"						

  X   Attached is our check for \$ to pay the fees calculated above.  
       A Petition for Extension of Time and the required fee are enclosed.  
       Other enclosures:

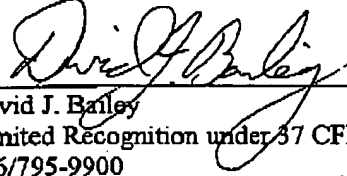
**Amendment Transmittal Letter**  
**Application No. 09/483,315**

The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A copy of this letter is enclosed.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By

  
David J. Bailey  
Limited Recognition under 37 CFR § 10.9(b)  
626/795-9900

DJB/tt

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